

MCSD SYSTEM ACCOUNT & PASSWORD REQUEST

Please fill out the following form so we can issue you a SYSTEM ID & Password for a computer log-in, E-mail, or other software applications.

Circle One:

EMPLOYEE **Day-SUB** **LT-Leave** **TOR** **SCB** **St-Tchr** **Contractor/Consultant/Other**

Print clearly your legal name (as it appears on a paycheck): _____

Department _____ Building: _____

Your position (ie. Aide, classroom teacher, special ed, guidance, etc): _____

If classroom teacher, what grade: _____ Special Ed ☐ Yes ☐ No ENL ☐ Yes ☐ No

Are you a long-term leave replacement? ☐ Yes ☐ No

Name of Staff on leave: _____ Leave Dates: _____

Former Student ? ☐ Yes ☐ No Former Employee? ☐ Yes ☐ No "2" Account? ☐ Yes

If non-MCSD employee:

Onsite ☐ or Remote only ☐ Instructional ☐ or Non-Instructional ☐

ID Card only ☐ Or Full Door Card Swipe ☐

Exactly what type of access is needed & why (ie: wireless, our computers, and/or email): _____

Expected end date of assignment: _____ Person you will be working with: _____

Sign your name: _____ Date of request: _____

Administrators name: _____ Administrators signature: _____

Personnel Staff Use Only

NYS Teacher ID _____ Local Employee ID _____ ☐ AUP on file Date: _____ Initials: _____

Systems

- ☐ Schooltool Sec group: _____
- ☐ StaffTrac _____
- ☐ Link-It _____
- ☐ NWEA _____
- ☐ _____
- ☐ ParentSquare Admin Access _____
- ☐ Frontline/My Learning Plan _____
- ☐ Frontline/IEP Direct (PPS decision) _____
- ☐ WinCap _____
- ☐ SchoolDude – Room Res _____
- ☐ Security Cameras ☐ Video drives
- ☐ Visitor Aware
- ☐ Transportation ☐ Zonar ☐ FuelMaster
- ☐ Wireless only
- ☐ AD Login/email

Technology Staff Use

- ☐ Email Distribution List
 - ☐ Administrator Instructional
 - ☐ Administrator Director
- ☐ HR Admin Folder: ☐ Read Only ☐ Read and Write
- ☐ ZOOM Account
- ☐ PHONE ☐ Voice Mail ☐ Phone Directory ☐ E- Faxing
- ☐ Phone Extension _____
- ☐ Mobile Device _____
- Replacing: _____
- NOTES: _____